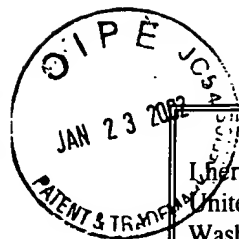


Atty. Docket No. MAR37-~~P~~314

1653/11
R37 P314 10



I hereby certify that this paper, together with all enclosures identified herein, are being deposited with the United States Postal Service as first class mail, addressed to the Assistant Commissioner for Patents, Washington D.C. 20231, on the date indicated below.

November 14, 2001

Date _____

Deborah A. Witvoet
Deborah A. Witvoet

with the
s, Harry
Feb 23 08

RECEIVED

FEB 04 2002

TECH CENTER 1600/2900

Examiner : David Lukton
 Art Unit : 1653
 Applicants : Lars E. Sundstrom et al.
 Appln. No. : 09/581,397
 Filing Date : October 2, 2000
 For : NEUROPROTECTIVE AGENTS

Assistant Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

Enclosed are Amendment A and Declaration Under Rule 1.132 to the Office Action dated June 14, 2001. The items checked below are appropriate:

X Applicants hereby petition for a two (2) month extension of time to respond to the above Office Action. The fee of \$200.00 for the Extension is enclosed.

Any fee for additional claims has been calculated as shown below:

01/28/2002 DTESSEM1 00000268 09581397

01 FC:216

200.00 OP

CLAIMS AS AMENDED

	Col. 1		Col. 2	Col. 3	Small Entity		Other Than A Small Entity	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	Rate	Add'l Fee
Total Claims	* 24	Minus	** 20	=	X \$9	\$ 36	x \$ 18	\$
Independent Claims	* 3	Minus	*** 3	=	x \$42	\$ 0	x \$ 84	\$
First Presentation of Multiple Dependent Claims \$140						\$ 0	x \$280	\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$ 36		\$

Applicants : Lars E. Sundstrom et al.
Appln. No. : 09/581,397
Page : 2

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3
- ** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.
The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

X Small entity status of this application under 37 C.F.R. §§ 1.9 and 1.27 has been established by a verified statement previously submitted.

 No additional fee is required.

X A fee of \$36.00 to cover the cost of the additional claims added by this response is enclosed.

X A fee of \$200.00 to cover Petition for Extension of Time is enclosed.

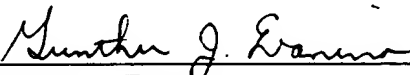
X Two Checks in the amounts of \$200.00 and \$36.00 are enclosed to cover the above fees.

X Please charge any additional fees or credit overpayment to Deposit Account 16 2463.
A duplicate copy of this sheet is attached.

PRICE, HENEVELD, COOPER,
DEWITT & LITTON

November 14, 2001

Date



Gunther J. Evanina
Registration No. 35 502
695 Kenmoor, S.E.
Post Office Box 2567
Grand Rapids, Michigan 49501
(616) 949-9610

GJE/daw